



### Health Insurance Exchange

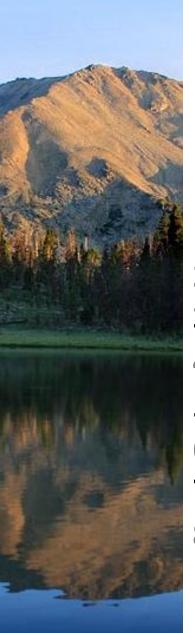
### Preserving Idaho's Options

August 22, 2011



### Impetus of Healthcare Reform

- Decades of continuous cost escalation threatens healthcare coverage for citizens. In 2010, 31% of Idahoans 18-34 years old did not have health insurance.
- Without insurance, access to healthcare is limited and quality of life is diminished.
- Current insurance pools for individuals and small businesses insure more people with health problems, resulting in higher claims, premiums and admin. costs, while offering poor value.
- Current system is unsustainable, both at state and federal level.



## National Healthcare Initiative Areas of Reform

		<b>Effective Date</b>
1.	<b>Pre-existing Conditions (Children)</b>	9/23/2010
2.	Lifetime Benefit Limits	9/23/2010
3.	<b>Coverage of Prevention Services</b>	9/23/2010
4.	Dependent Child Age Limit	9/23/2010
5.	Insurance Co. Admin Costs	1/01/2011
6.	Insurance Exchange (Certification)	1/01/2013
7.	<b>Expansion of Medicaid</b>	1/01/2014
2	Mandate to be Insured	1/01/2014



## Health Insurance Exchange Basics

- Exchange allows individuals and small businesses the same economies of scale of large businesses by pooling:
  - 1. Risk
  - 2. Market leverage
  - 3. Transaction costs
- Assists eligible individuals to receive premium tax credits or coverage through Federal or State health care programs, such as Medicaid.



## Two Components of an Exchange

#### 1. Medicaid

Low-income Idaho citizens will use web-enabled exchange to enroll in a benefit plan.

#### 2. Competitive Marketplace Exchange

Provides individual/small business easy comparison of price, benefit package, service, quality.



### Medicaid Portion of Exchange is Mandated

- All states must develop eligibility interface, which will serve all Medicaid applicants.
- Idaho cannot ignore the requirement, or the State risks the loss of federal funding in both Medicaid and TANF programs. Current Medicaid SFY 2012 appropriation is \$1.8 billion, which includes \$1.2 billion federal funds.
- Medicaid Advanced Planning document process is underway, will have 90/10 participation.



# Idaho's Competitive Marketplace Exchange

1. State Exchange: Idaho has federal authority to develop a State-controlled exchange. Default is a federally controlled exchange.

2. Federal planning and implementation grants for an Idaho exchange require no state match.

Exchange must be operational by 1/1/2014



# Advantages of a State Controlled-Exchange

- Allows Idaho to decide which insurance carriers participate to assure more competition and choice.
- State can encourage citizens to purchase private policies and not enroll in Medicaid.
- State can maximize premium tax revenue.
- DHW can leverage expensive system upgrades for other programs, such as SNAP.
- This option is less expensive for state since common architecture reduces expense under Medicaid compliance module.



### Sept. 30<sup>th</sup> Grant Deadline

- Idaho Exchange grant opportunity will not be available again until Dec. 30th.
- If state does not meet Sept. grant deadline, time is lost, making it impossible to certify project by January 2013 deadline.
- Without grant, Idaho will be forced to accept federal exchange.



### **Update**

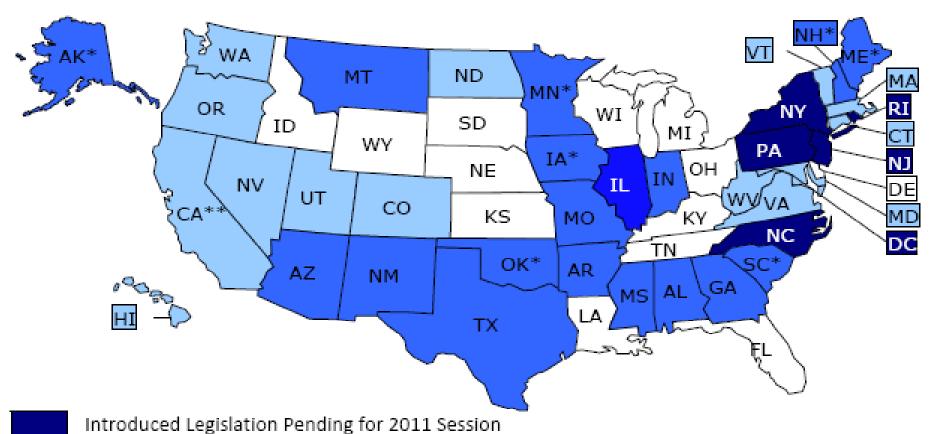
- HHS issued proposed rules for the Implementation of an HIE (July 11, 2011)
- HHS issued proposed rules for the Medicaid Program – Eligibility Changes (August 11, 2011)
- Department of the Treasury issued proposed rules regarding Premium Tax Credits (August 11, 2011)

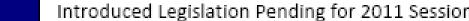


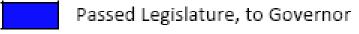
### **Update (Continued)**

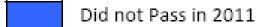
- Federal Health Insurance Exchange will be in place and operational by January 2014
  - Provide coverage in states that have not implemented an exchange or...
  - Not met certification requirements by
     1/1/2013

#### Health Insurance Exchange Establishment Legislation **July 2011**















## Other States' Early Cost Estimates

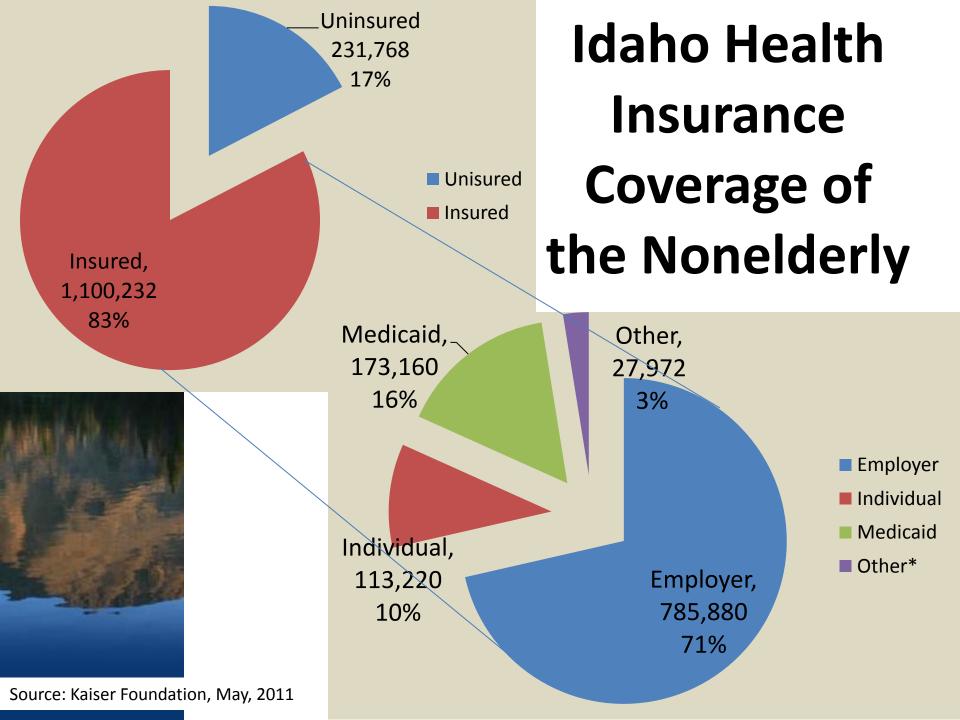
	Totals
Washington	\$99,106,669
(2011-2014)	
Kansas	\$62,685,543
(2 year)	
Wisconsin	\$49,507,526
(2010-2013)	

**Idaho's Estimate = \$40,000,000** 

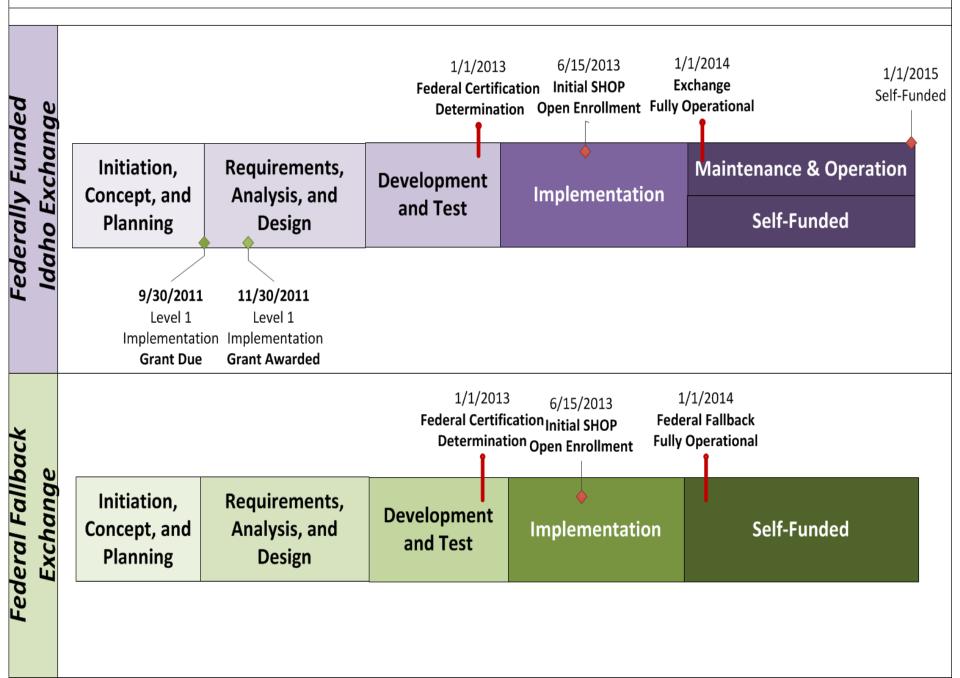


### Planning Phase Update

- Planning for Idaho's Health Insurance
   Exchange is in progress and focused on:
  - Stakeholder Input
  - Background Research
  - Legislative
  - Program Integration with Medicaid and CHIP
  - IT Systems
  - Project Plan



#### Idaho Controlled Exchange vs. Federally Controlled Exchange Timeline





#### **Bottom Line**

 If by 1/1/2013 Idaho does not demonstrate that it will be ready to run a certified Exchange by 1/1/2014, the federal government will impose and run an Exchange in the state.



## Proposal: Preserve Idaho's Options

- Apply for funding for Idaho Exchange.
  - Submitting grant application does not lock Idaho into building a Competitive Market Exchange.
  - Securing grant allows Idaho time to make decisions.
- 2. Wait for lawmakers to decide options for Idaho Exchange.
- 3. Return/Accept funding for Idaho Exchange based on state decisions.
- 4. By not meeting grant application deadline, Idaho forfeits opportunity to decide on exchange.